



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2004 8:00 am
Secretary of State

07-19-2004 90008 017 ***150.00

DOCUMENT # P96000094855 1. Entity Name CHIRICO, INCORPORATED					
Principal Place of Business 1304 W VINE ST KISSIMEE, FL 34741 US			Mailing Address 1304 W VINE ST KISSIMEE, FL 34741 US		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
07122004 Chg-P CR2E034 (10/03)				4. FEI Number 59-3411985	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CHANG, CHIN L 1304 W VINE ST KISSIMEE, FL 34741			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHANG, CHIN 1304 W VINE ST KISSIMEE, FL 34741 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Chang Chin L</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			7-9-2004 407-933-8448 <small>Date Daytime Phone #</small>		

Attachment

57063334

#P96000094855

Chirico, Inc.
1304 W. Vine Street
Kissimmee, FL 34741

Florida Department of State
Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314-6198

July 7, 2004

Re. 2004 Annual Report

Dear Division of Corporations,

We received your postcard today saying that we did not file our 2004 Corporate Annual Report. However, this was the first notice we received from you. Please waive the \$400.00 penalty and accept our \$150.00 payment for the 2004 Corporate Annual Report. Thank you.

Sincerely,

Chin Liu Chang, President

